## Town of Needham Retiree Health Insurance Medicare Supplement/Advantage Plans

## CY2019 Monthly Rates - Effective January 1, 2019

Must be a Needham Retiree, Spouse or Surviving Spouse and enrolled in both Medicare Parts A & B to be eligible

Company	Plan	Provider Network	2019 Full Monthly Rate	Contribution %		2019 Monthly Rate	
				Retiree	Town	Retiree (YOU PAY)	Town
Tufts Medicare	Supplement PDP Plus	No Network	\$ 369.00	32.0%	68.0%	\$ 118.08	\$ 250.92
	Preferred HMO	НМО	\$ 317.00	50.0%	50.0%	\$ 158.50	\$ 158.50
Harvard Pilgrim	Medicare Enhanced	No Network	\$ 370.00	50.0%	50.0%	\$ 185.00	\$ 185.00
Blue Cross Blue Shield	MEDEX	No Network	\$ 392.00	50.0%	50.0%	\$ 196.00	\$ 196.00
	Managed Blue for Seniors	нмо	\$ 365.00	32.0%	68.0%	\$ 116.80	\$ 248.20
Fallon Health	Senior Plan HMO	нмо	\$ 399.00	50.0%	50.0%	\$ 199.50	\$ 199.50